Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N. French Dr., Hobbs, NM 87240	Energy, Minerals and Natural Resources		Revised March 25, 1999 WELL API NO. 30-007-20150	
<u>District II</u>	OH CONCEDUATION DIVICION			
811 South First, Artesia, NM 87210 <u>District III</u>	2040 South Pacheco		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.	
2040 South Pacheco, Santa Fe, NM 87505			o. State Off & Gas I	Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name:	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM €-101) FOR SUCH			VPR D	
PROPOSALS.) 1. Type of Well:			Y A 3	K D
Oil Well Gas Well Other				
2. Name of Operator EL PASO ENERGY RATON, L.L.C.			8. Well No. 22	
3. Address of Operator			9. Pool name or Wildcat	
P.O. BOX 190; RATON, NM 87740 4. Well Location				
4. Wen Location				
Unit LetterF_:1739' feet from the North line and2392'feet from theWestline				
Section 31 Township 31N Range 18E NMPM COLFAX County				
10. Elevation (Show whether DR, RKB, RT, GR, etc.)				
8707' (GR)				
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WCR				LTERING CASING
TEMPORARILY ABANDON				LUG AND
	MULTIPLE COMPLETION	CASING TEST AN CEMENT JOB		BANDONMENT
OTHER:		OTHER: CHANG	GE OF OPERATOR	
12. For the referenced well, the operator has changed:				
	T FUR			
From: Sonat Raton, L.L.C. To: El Paso Energy Raton, L.L.C. P.O. Box 190 P.O. Box 190				
Raton, New Mexico 87740 Raton, New Mexico 87740				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE TITLE SR. PETROLEUM ENGINEER DATE 07/23/00				
Type or print name: DON LANKFORD Telephone No.: (505) 445-4621				
(This space for State use)				
APPPROVED BY Ky Chokum TITLE DISTRICT SUPERVISOR DATE 8/7/00				
Conditions of approval, if any:				